## BEST AVAILABLE COPY

Application or Docket Number

Effective October 1, 2000  Oq/7277 44												
		SMALL ENTITY OTHER THAN TYPE OR SMALL ENTIT										
TOTAL CLAIMS							RATE		FEE	1	RATE	FEE
FO	R	NUMBER FILED		NUMBER EXTRA		BASIC	EE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGE	27 minus 20=		•	• 7		=		OR	X\$18=	126	
<b></b>	EPENDENT C	H minus 3 =		•		X40:	=	-	OR	X80=	20	
MU	LTIPLE DEPE	NDENT CLAIM P	RESENT				+135	=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	L		OR	TOTAL	916
CLAIMS AS AMENDED - PART II										3	OTHER	
		(Column 3)	SMAI	L E	NTITY	OR	SMALL	ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	MBER OUSLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	· 25	Minus		27	=	X\$ 9	-		OB.	X\$18≅	
AME	Independent • -				T CLAIM	-	X40=		/	OR	X80=	١,
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135			OR	+270=	
	A Committee of the Comm							AL FF		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	ADDIT. F				Nooii 22.	
AMENDMENT B	<u></u>	CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVIO PAID	MBER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	<b>*</b> · .	Minus			=	X\$ 9	-	1	OR	X\$18=	
NA N	Independent	ATATION OF M	Minus	***		-	X40=			OR	X80=	
	PINOI PINEOE	ENTATION OF MU	JLHPLE DEF	ENDEN	CLAIM		+135:	-		OR	+270=	
								AL FE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun	mn 2)_	(Column 3)	ADDIT. F	C E. =		•	MUUII. T ELE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID I	BER	PRESENT EXTRA	RATE	T	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S	Total		Minus	••		=	X\$ 9=			OR	X\$18=	
AME	Independent	•	Minus	***			X40=	十			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT, FEE	
T	he "Highest Num	nber Previously Paid	d For" (Total or	Independe	ont) is the	highest number 1	found in the	appr	opriate box	in col	umn 1.	